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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE
ADDRESS**

Application Number	10519,717
Filing Date	July 16, 2005
First Named Inventor	Serguei VATCHIANIS
Art Unit	1742
Examiner Name	Daniel J. JENKINS
Attorney Docket Number	DSM

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number :

1059

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

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OR

☐ Firm or
Individual Name

Address

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State

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Serguei VATCHIANIS

Date

5.05.2006

Telephone

514-9198796

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below.☐ Total of _____ forms are submitted.

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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. Docket NO./TITLE
10/619,717	07/15/2003	Serguei Vatchiants	DSIM

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Date Mailed: 05/24/2006

NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 05/05/2006.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

Ull
 VICTORIA VAN
 PTOSS (703) 305-0677

ATTORNEY/APPLICANT COPY

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